

CITY OF TORRINGTON

Fence Building Permit

Lot:	Block:	Zoning:	Occup Type:	Const Type:
Address:			Sub/Tract:	

Phone:**Phone:****Phone**

Date

Date:

\$30.00

**Mail To: City of Torrington
Zoning Officer
P. O. Box 250
Torrington, WY 82240**

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Zoning Officer
P. O. Box 250
Torrington, WY 82240**